

Docket No.
02420/1001249-US2

Application No.
10/076,905

Filing Date
February 14, 2002

Examiner
Not Yet Assigned

Art Unit
N/A

Applicant(s):

Invention: INHIBITION OF ATF2 ACTIVITY TO TREAT CANCER

TO THE COMMISSIONER FOR PATENTS

Transmitted herewith is an amendment in the above-identified application.

The fee has been calculated and is transmitted as shown below.

CLAIMS AS AMENDED					
	Claims Remaining After Amendment	Highest Number Previously Paid	Number Extra Claims Present	Rate	
Total Claims	46	- 46 =		x	0.00
Independent Claims	4	- 4 =		x	0.00
Multiple Dependent Claims (check if applicable) <input type="checkbox"/>					
Other fee (please specify): Extension for response within first month					55.00
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT:					55.00

☐ Large Entity

x Small Entity

☐ No additional fee is required for this amendment.

☐ Please charge Deposit Account No. _____ in the amount of \$ _____
A duplicate copy of this sheet is enclosed.

☒ A check in the amount of \$ 55.00 to cover the filing fee is enclosed.

☐ Payment by credit card. Form PTO-2038 is attached.

☒ The Director is hereby authorized to charge and credit Deposit Account No. 04-0100
as described below. A duplicate copy of this sheet is enclosed.

☒ Credit any overpayment.

☒ Charge any additional filing or application processing fees required under 37 CFR 1.16 and 1.17.

Stephanie R. Amoroso, Ph.D.
Attorney Reg. No.: 51,401

Dated: May 18, 2004

DARBY & DARBY P.C.
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(212) 527-7770

Express Mail Label No.

Dated: _____



Application No. (if known): 10/076,905

Attorney Docket No.: 02420/100I249-US2

Certificate of Express Mailing Under 37 CFR 1.10

I hereby certify that this correspondence is being deposited with the United States Postal Service as Express Mail, Airbill No. _____ in an envelope addressed to:


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Commissioner for Patents
P.O. Box 1450
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on May 18, 2004
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One Month Request for Extension of Time Under 37 CFR 1.136(a)
Amendment in Response to Non-Final Office Action (7 pages)
Amendment Transmittal (1 page)
Fee Transmittal (1 page)
Check in the amount of \$55.00 **CHECK #5002**
Return Receipt Postcard